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CONFIRMATION NO. 4105

SERIAL NUMBER 09/748,510	FILING DATE 12/26/2000 RULE	CLASS 705	GROUP ART UNIT 3624	ATTORNEY DOCKET NO. 19571.000								
APPLICANTS Fredrick L. Pittroff, Denver, CO; <div style="text-align: right; margin-top: 20px;"> </div>												
** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****												
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 01/31/2001												
<table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged </td> <td style="width: 10%; border: none; text-align: center;"> <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance </td> <td style="width: 10%; border: none; text-align: center;"> Examiner's Signature </td> <td style="width: 10%; border: none; text-align: center;"> Initials </td> <td style="width: 10%; border: none; text-align: center;"> STATE OR COUNTRY CO </td> <td style="width: 10%; border: none; text-align: center;"> SHEETS DRAWING 11 </td> <td style="width: 10%; border: none; text-align: center;"> TOTAL CLAIMS 15 </td> <td style="width: 10%; border: none; text-align: center;"> INDEPENDENT CLAIMS 2 </td> </tr> </table>					Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	 Examiner's Signature	Initials	STATE OR COUNTRY CO	SHEETS DRAWING 11	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
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ADDRESS 28286 FAEGRE & BENSON LLP Attn: PATENT DOCKETING 2200 WELLS FARGO CENTER 90 SOUTH 7TH STREET MINNEAPOLIS, MN 55402-3901												
TITLE Systems and methods for enterprise based issuance of identification cards												
FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit		
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